

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000004076

FILED  
Jan 04, 2008  
Secretary of State

Entity Name: BCI ARCHITECTURAL SPECIALTIES, LLC

**Current Principal Place of Business:**

2429 SUMMIT AVENUE  
RACINE, WI 53404

**New Principal Place of Business:**

**Current Mailing Address:**

2429 SUMMIT AVENUE  
RACINE, WI 53404

**New Mailing Address:**

FEI Number: 39-1100507

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CHISHOLM, SARAH H  
350 NORTHEAST 28TH ROAD  
BOCA RATON, FL 33431 US

**Name and Address of New Registered Agent:**

CHISHOLM, SARAH H  
6453 W ROGERS CIR  
C4  
BOCA RATON, FL 33487 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

01/04/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: CEO ( ) Delete  
Name: THOMPSON, GREGG  
Address: 221 - 13TH AVENUE  
City-St-Zip: RACINE, WI 53403

Title: PRES ( ) Delete  
Name: DOERFLINGER, RICK B  
Address: 1445 LAURA AVENUE  
City-St-Zip: RACINE, WI 53406

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: RICK DOERFLINGER

PRES

01/04/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date